## Case 19-11538-elf Doc 36 Filed 10/28/19 Entered 10/28/19 11:29:31 Desc Main Document Page 1 of 2

Fill in this info	rmation to id	entify your case:									
Debtor 1	Nicholas	J.	Rivelli								
Depioi I	First Name	Middle Name	Last Name			Che	ck if this is:				
Debtor 2	First NI	KAT-LIL N	1 81			$\overline{\mathbf{Q}}$	An amended filing				
(Spouse, if filing)		Middle Name	Last Name	/1 \ <i>/</i> / ^			A supplement showing postpetition				
United States Ba	. ,		IST. OF PENNS	LVA	NIA	ш	chapter 13 income as of the following date:				
Case number (if known)	<u>19-11538E</u>	LF13		_			MM / DD / YYYY				
Official Form	106I						IVIIVI / DD / TTTT				
Schedule I: Y		Δ					12/15				
responsible for sup include information about your spouse your name and cas	oplying correct in about your spo . If more space i	nformation. If you are use. If you are separ s needed, attach a se wn). Answer every o	e married and not ated and your spo eparate sheet to th	filing ouse i	jointly, and y s not filing w	our : ith y	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write				
Fill in your em information.	ployment		Debtor 1				Debtor 2 or non-filling spouse				
If you have mor	_										
job, attach a se with informatior	parate page	Employment status	✓ Employed Not employed	ed			☐ Employed ☐ Not employed				
additional empl	oyers.	Occupation	Unemployed				_ , ,				
Include part-tim or self-employe	ne, seasonal,	Employer's name									
Occupation ma student or home applies.		Employer's address	Number Street				Number Street				
			City		State Zip Co	de	City State Zip Code				
				L _							
	ŀ	low long employed th	here? <u>6 Mont</u>	ns			<del></del>				
Part 2: Give	e Details Abou	ut Monthly Incom	е								
Estimate monthly in non-filing spouse un			<b>n.</b> If you have noth	ing to	report for any	y line	, write \$0 in the space. Include your				
	• .	more than one employe ate sheet to this form.	er, combine the info	ormati	on for all emp	oloye	rs for that person on the lines below. If				
					For Debtor	1	For Debtor 2 or non-filing spouse				
		ary, and commissions nonthly, calculate what		2.	\$0	.00					
3. Estimate and I	ist monthly over	time pay.		3. 🖣	F\$0	.00					
4. Calculate gros	s income. Add	ine 2 + line 3.		4.	\$0	.00					

Debtor 1		Nicholas J. Rivelli			Case number (if know				11 <u>5</u>	38ELF13	
				For [	Debtor 1		or Debtor 2 non-filing sp				
	Сор	y line 4 here	4.		\$0.00	_			_		
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$0.00						
	5b.	Mandatory contributions for retirement plans	5b.		\$0.00						
	5c.	Voluntary contributions for retirement plans	5c.		\$0.00						
	5d.	Required repayments of retirement fund loans	5d.		\$0.00						
	5e.	Insurance	5e.		\$0.00						
	5f.	Domestic support obligations	5f.		\$0.00						
	5g.	Union dues	5g.		\$0.00						
	5h.	Other deductions. Specify:	5h.+	٠	\$0.00						
	<b>Add</b> 5g +	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$ .	6.	_	\$0.00						
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$0.00						
8.	List	all other income regularly received:									
8a.	Net income from rental property and from operating a business, profession, or farm	8a.		\$0.00							
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.									
	8b.	Interest and dividends	8b.		\$0.00						
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	_	\$0.00			_			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.									
	8d.	Unemployment compensation	8d.		\$0.00						
	8e.	Social Security	8e.		\$0.00			_			
	8f.	Other government assistance that you regularly receive									
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.									
		Specify:			\$0.00						
•		Pension or retirement income Other monthly income.			\$0.00			_			
					Ψ0.00			—			
	O	Specify: Gary Rivelli (Father)	8h. 🖣		\$3,620.00						
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	$\overline{}$	\$3,620.00	ſ					
		culate monthly income. Add line 7 + line 9.	10.		\$3,620.00	+		司	=	\$3,620.0	<u> </u>
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  e all other regular contributions to the expenses that you list in So	chodi	ا مار		_			_		
	Inclu	ide contributions from an unmarried partner, members of your househ ds or relatives.			pendents, yo	ur ro	oommates, ar	าd oth	er		
	Do n	not include any amounts already included in lines 2-10 or amounts that	t are r	not ava	ailable to pay	exp	enses listed	in Sch	nedu		
	Spe	cify:						11.	+_	\$0.0	<u>0</u>
12. Add	the amount in the last column of line 10 to the amount in line 11.	nonthly	12.		\$3,620.0	0					
incon		me. Write that amount on the Summary of Your Assets and Liabilities		C	ombined	<u> </u>					
	11 11 8	applies.								onthly incon	ne
13.		you expect an increase or decrease within the year after you file the	his fo	rm?							
	$   \sqrt{} $	No. None.									_
		Yes. Explain:									